

030076

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OFFICIAL

In Re Application of:

Peter Gaal

Serial No.: 10/624,367

Filed: July 21, 2003

For: MULTIPLE MEASUREMENTS PER
POSITION FIX IMPROVEMENTS

Group Art Unit: 2863

RECEIVED
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JUL 29 2004

RESPONSE TO OFFICE ACTIONCommissioner of Patents
Alexandria, VA 22313Attention: Xiuqin Sun
Examiner

Dear Sir:

In response to the Office Action dated May 5, 2004, please consider the following remarks in conjunction with the above-identified application:

I certify that this correspondence is being sent via
to the Commissioner of Patents and Trademarks,
Washington, D.C. 20231, on:

July 20, 2004

(Date of Deposit)

Victoria J. Pacey

(Name of Person Making Deposit)

(Signature)

05/2004 AJOHNS01 00000000 170000 10000000
FC:1201 258.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

10624367

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	35	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	35 minus 20 =	* 15
INDEPENDENT CLAIMS	8 minus 3 =	* 5
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 28 Minus ** 35	=
	Independent	* 1 Minus *** 8	= 3
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* Minus **	=
	Independent	* Minus ***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* Minus **	=
	Independent	* Minus ***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	375.00	OR	BASIC FEE	750.00
X\$ 9=		OR	X\$18=	270
X42=		OR	X84=	420
+140=		OR	+280=	
TOTAL		OR	TOTAL	1640

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	258
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	258

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	